

Please type a plus sign (+) inside this box + Index the Paperwork Reduction Act of 1995, no persons are required to re-		PTO/SB/01 (10-0 for use through 10/31/20 <u>02. OMB</u> 0651-00: Office; U.S. DEPARTMENT OF COMMERC Inless it contains a valid OMB control number		
nder the Paperwork Reduction Act of 1995, no persons are required to be	Attorney Docket Number	1999-0096A		
DECLARATION FOR UTILITY OR	First Named Inventor	David A. Kapilow		
DESIGN	COMPLETE IF KNOWN			
PATENT APPLICATION	Application Number			
(37 CFR 1.63)	Filing Date			
Declaration Submitted OR Declaration Submitted after Initial	Group Art Unit			
with Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name			
As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated I believe I am the original, first and sole inventor (if only one names are listed below) of the subject matter which is claimed Method And Apparatus For Performing Concealment	name is listed below) or an origin d and for which a patent is soug			
· ·	of the Invention)			
the specification of which is attached hereto		La Number of BCT International		
OR 19/04/2000 19/04/2000	as United States Appl PCT/US00/1063	ication Number or PCT International (if applicable).		
Application Number / TISOO / 10637 and was ame				

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as

amended by any amendment specifically referred to above.

Certified Copy Attached? **Priority** Foreign Filing Date **Prior Foreign Application Not Claimed** YES (MM/DD/YYYY) Country Number(s)

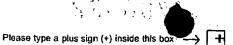
	10.00	. Also shoot PTO/SR/02B attached hereto
_	Additional foreign application numbers are listed on a supplemental priority	V data sheet F to/ob/oza attacker
1 1	Additional foreign application numbers are listed on a supplication	

35 U.S.C. 119(e) of any United States provisional application(s) listed below.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed over the state of								
Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application						
60/130016	19/04/1999	numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.						
	1							

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will very depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.





PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a vaild OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number or Bar Code Label OR X Correspondence address below								
Name AT&T CORP.								
Address P. O. Box 4110								
Address								
City Middletown		· · · · · ·	-	New State	Jersey	ZIP 07	748	
Country USA	·	Telephon	_e (908)	221-5	5720	(732) 3	368-6932	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INV	ENTOR:			A petition	on has been file	ed for this un	signed inventor	
Given Name (first and middle [if any]) Davi	d A.			Family N		Kapilow		
inventor's Signature Date 11/8/2000 122 Washington Street								
Residence: City Berkeley Hei		et 	State N	J	J Country USA Citizenship USA			
Mailing Address								
Mailing Address								
City	State			ZIP		Country	Country	
NAME OF SECOND INVENTOR	;			A petiti	on has been file		signed inventor	
Given Name (first and middle [if any]) Family Name or Surname								
Inventor's Signature								
Residence: City			State		Country	Citizenship		
Mailing Address								
Mailing Address								
City	State			ZIP Country				
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.								